	IA ETHICS AND
FOR INSTRUCTIONS, SEE BACK OF FORM CAP CHECK ONE:	1PAIGN DISCLOSURE BD. FORM STATEMENT DR-1 OF
This is an initial* Statement of Organization 20	(Rev. 10/2009) ORGANIZATION
☐ This is an amended" Statement of Organization * Statement must be filed within 10 days of committee accepting contribution.	PDF Office Use Univ
incurring debts exceeding \$750. Amendments must be filed within 30 days of	of a change. Indexed
Effective January 1, 2010, all statements and reports filed by new committee electronically and effective January 1, 2012, all statements and reports filed it	
must be filed electronically. Effective May 1, 2010, all statements and reports for State PACs and State F	
	candidate's last name in the name of the committee.) If amending committee name,
put old name in ().	
ELECT BOSWELL, 2010	
IMPORTANT: Indicate type of committee you are reporting for: 5 (1) Statewide PAC (3) State Party (4) County Central Committee (2) Statewide PAC (3) State Party (4) County Central Committee (2)	
(5) County Candidate (8) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC	
(19 School Board of Other Political Subclivision PAC (11) Bance Issue	e (including committee involved in multiple city/county bandt riskles)
COMMITTEE TREASURER (mandatory for all committees) Name Very Committee (mandatory for all committees)	COMMITTEE CHAIR (mandatory except for a candidate beommittee)
Mary I., Boswell	Gary L. Boswell
Malling Address 1890 East Main	Malling Address 1890 East Main
City, State 1	City, State ↓ ↓ Zip Code ↓ ↓ Lamoni, lowa 50140
Phone (641) 784-7646	Phone (641) 784-7646
e-Mail miboswell@grm.net	e-Mail gboswell@grm.net
INDICATE PURPOSE OF COMMITTEE - Check One Box Z Adve	ocate for/against candidate(s)
Comment or description: Support Gary Boswell for election	Advocate against ballot Issue(s) County/Local Candidates and Ballot Issue Committees Enter:
All Candidates Enter: Office Sought: Decatur County Board of Supervisors	•
Political Party (If applicable) Republican	County: Decatur County (If active in multiple ballot issue elections, attach list of counties
District:	• • • • • • • • • • • • • • • • • • • •
Year Standing for Election; 2010	Date of Election: 6/8/2010, 11/2/2010
Bank Account Name (must match committee name)	Candidate name & Address or Parent Entity (PACs. if applicable).
ELECT BOSWELL, 2010	Chinesed a) Apalloni
Name of Financial Institution/type of Account	Gary L. Boswell Meiling Address ↓ ↓
Bank of the West, Checking Account	1890 East Main
Mailing Address ↓ ↓	City + + State + + Zip + +
PO Box 70	Lamoni lowa 50140
City ↓ ↓ State ↓ ↓ Zip ↓ ↓	Phone (641) 784-7646
Lamoni IA 50140	
	e-Mail gboswell@grm.net
STATEMENT OF AFFIRMATION: By filing this document the committee sifts	The the fallendam
	•
 The committee and all persons connected with the committee understand that rules in Chapter 351 of the lows Administrative Code. 	they are subject to the laws in lowe Code chapters 68A and 68B and the administrative
2. Theilman Code coding COs 400 and the Art 400 and the Fire and	
4. The lower good becalon company and rung 351—4.9 require the filing of discloss	ure reports and that the failure to file these counts on or before the required two states
c. That lows code section co.4402 and rule 351—4.9 require the hing of discloss subjects the candidate or chairperson (in the case of committees other than a can imposition of other criminal and civil sanctions.	ura reports and that the failure to file these raports on or before the required due dates didate's committee) to the automatic assessment of a civil penalty and the possible
imposition of other criminal and civil sanctions. 3. That lowe Code section 68A.405 and rules 351—4.38 through 4.43 require the materials except for those items exempted by statute or rule. A committee that we	ofidate's committee) to the automatic assessment of a civil penelty and the possible
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